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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

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	Application Number	09/851,030					
	Filing Date	May 7, 2001					
	First Named Inventor	Michael CRISTOFALO					
	Art Unit	2623					
	Examiner Name	K. O. T. Bui					
	Attorney Docket Number	559442004300					

Р.	O. Box 14	ner for Patents 50 VA 22313-1450								
Please v	Please withdraw me as attorney or agent for the above identified patent application, and									
all t	all the attorneys/agents of record.									
the	the attorneys/agents (with registration numbers) listed on the attached paper(s), or									
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Attorneys of record have been discharged by the client in accordance with 37 CFR § 10.40(b)4.										
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2. X C	2. X Change the correspondence address and direct all future correspondence to:									
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	X Firm or Individual Name Marc Kaufman, Esq.									
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NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.										